



Request to Change Mailing Address for Municipal Services Bill

Account No. - . Date _____

Account Address _____

City _____ State _____ Zip _____

I, as the owner or the owner's agent, request that until further notice, the Municipal Services Bill (water bill) for the above property be mailed to the following name and address:

Name _____

(Please print.)

Address _____

City _____ State _____ Zip _____

Signature _____ Phone _____

Printed Name _____

Please check one. ☐ Owner ☐ Owner's Agent

Note: This change will remain in effect until notice of cancellation.

This request may be transmitted to the Water Works by including it with a Property Recording filing to the Department of Neighborhood Services; by mailing it to Milwaukee Water Works, 841 N. Broadway, Rm. 406, Milwaukee, WI 53202, or by faxing it to (414) 286-5452.